UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR P	ATENT FE	E REFU	ַםַּאנ		4	
1 Date of Request:	2 Seri	al/Pa	tent	ر پر	175	5 V
3 Please refund the following fe	e(s):	4 PAI NUM	PER IBER		DATE FILED	6 AMOUNT
Filing						\$
Amendment						\$
Extension of Time						\$
Notice of Appeal/Appeal						\$
Petition						\$
Issue						\$
Cert of Correction/Termina	l Disc.					\$
Maintenance						\$
Assignment						\$
Other						\$
		7 TOTAL AMOUNT OF REFUND			NT :	\$
		8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check \$500.00				
Overpayment			GreditXDeposit A/C #:			
Duplicate Payment			9		<u> </u>	
No Fee Due (Explanation):				 		
	·					
		<u> </u>				
			-			
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME:				TITLE	Z:	
SIGNATURE:			BUTCREPORE: -580.88 OP			
OFFICE:	****	****	***	****		
THIS SPACE RESERVED FOR FINANCE						
APPROVED:		DATI	E:			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)